PART B - FEE(S) TRANSMITTAL

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:	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 004372 7590 09/02/2004				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
ARENT FOX KINTNER PLOTKIN & KAHN 1050 CONNECTICUT AVENUE, N.W. SUITE 400 WASHINGTON, DC 20036								
11/23/2004 NNGUYEN2 00000062 09936622					<u> </u>	(Signatore)		
01 F(C:1501 1370.00 DP C:8001 30.00 DP						(Date)	
	APPLICATION NO.	FILING DATE)	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
,	09/936,622	01/04/2002		•	Brosse	024118-00013	8733	
	TITLE OF INVENTION: USE OF SUPERABSORBENT POLYMERS FOR TREATING RAW SKINS, CORRESPONDING COMPOSITIONS AND METHODS RESULTING TREATED SKINS							
,	APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
,	nonprovisional	NO	\$1330)	\$0	\$1330	12/02/2004	
:j	EXAMINER		ART UNIT		CLASS-SUBCLASS			
	TOOMER, CEPHIA D		1714		252-380000			
	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
					data will appear on the patent. If an assignee is identified below, the document has been filed for T a substitute for filing an assignment.			
	(A) NAME OF ASSIGNEE (E			B) RESIDENCE: (CITY and STATE OR COUNTRY)				
	SNF S.A.				-Eitenne, Fra	nce		
	Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):							
	Issue Fee			A check in the amount of the fee(s) is enclosed.				
41	Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
,	Advance Order - # of Copies 10				The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number			
-	5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.			🖺 b. Appli	cant is no longer claiming	SMALL ENTITY status. See 37	CFR 1.27(g)(2).	
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	Authorized Signature Robert & Carpent			Date 11/22/04				
	Typed or printed name Robert K. Carpenter				Regis	stration No. 34,794		
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